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SERIAL NUMBER	FILING DATE	FIRST NAMED APPLICANT	ATTO	DRNEY DOCKETT NO.
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			EXAMINER	
		,		
			ART UNIT	PAPER NUMBER
		DATE	MAILED:	10
		EXAMINER INTERVIEW SUMMARY RECORD	MIAILED.	
All participants (applicar	nt, applicant's representat	tive, PTO personnel):		
		(EX) (3) MARY LOWIS		
(2) ARDIN MA	KSCHEL P.	(4)		
Date of interview	3/1/02			
Type: D Telephonic	/ □ Personal (copy is give	en to 🛘 applicant 🗘 applicant's representative).		
Exhibit shown or demonstration conducted: Yes No. If yes, brief description:				
			-	
,		+ al. (1994)		
Description of the general	al nature of what was agr	reed to if an agreement was reached, or any other comments:	The 112 f	Prst paragraph
158US of daim	5 1,8,11,18,21 and	28 were discussed with possible an	nendments;	o overcome Mu
rejection; no agr	eement was reac	hed. The 112 second paragraph is us s of	daims 1,89,11,1	8,19,21,28, and 29
were discussed	with posible an	vendments to overcome the rejection; 10 a	agrooment was	reached. The
102(b) rejection	was discussed wi	MA possible amendments to claim 1; no	agreement w	18 reached.
(A fuller description, if ne	cessary, and a copy of the	he amendments, if available, which the examiner agreed would to which would render the claims allowable is available, a sum	ld render the claims a	allowable must be
□ 1. It is not necessa	ry for applicant to provide	e a separate record of the substance of the interview.		
WAIVED AND MUST IN	CLUDE THE SUBSTANC	o indicate to the contrary, A FORMAL WRITTEN RESPONSE OE OF THE INTERVIEW (e.g., items 1-7 on the reverse side of ven one month from this interview date to provide a statement	of this form). If a resi	onse to the last Office
requirements th response requir	at may be present in the ements of the last Office	above (including any attachments) reflects a complete responsant Office action, and since the claims are now allowable, this action. Applicant is not relieved from providing a separate reference.	s completed form is o	considered to fulfill the
box 1 above is a	also checked.	~ CIR		
PTOL-413 (REV. 2-93)		Examiner's Signature		
	ORIGINAL	FOR INSERTION IN RIGHT HAND FLAP OF FILE WHAPP	En	